PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or $\underline{\underline{\mathcal{D}}}$ ocket Number

10719920

		CLAIMS A	S FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			16			-		RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			16 mir	nus 20=	*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			\	nus 3 =	*			X43=		OR	X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	less than ze	zero, enter "0" in column 2			ı	TOTAL	195	OR	TOTAL	
CLAIMS AS AMENDED - PART II									1/2/11	,	OTHER	THAN
(Column 1)				(Colun		(Column 3)	_	SMALL	ENTITY	OR	SMALL	ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	ĺ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	Ī	X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				CLAIM			+145=		OR	+290=	
								TOTAL			TOTAL	
ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)												-
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	r	HIGHI NUME PREVIC PAID I	EST BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= '		X43=	:	OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							Ī	+145=	·	OR	+290=	
							·L	TOTAL DDIT. FEE	· · · · · · · · · · · · · · · · · · ·	OB	TOTAL ADDIT. FEE	
		,		-	•							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUME PREVIO PAID F	ST BER USLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON I	Total	*	Minus	**		= .	ſ	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=	r	X43=			X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM		· -	7.10-		OR		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								+145= TOTAL		OR	+290=	
***	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										TOTAL ADDIT. FEE	
1	he "Highest Num	ber Previously Paid	For" (Total or	Independe	nt) is the	highest number	four	d in the ann	ropriate box	in coli	ime 1.	